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Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION

). 		TO TRA	NSP	ORT OIL	AND NAT	TURAL GA					
Operator MESA OPERATING LIMITED PARTNERSHIP							Well A	Well API No. 30-045 · 06991			
P.O. BOX 2009, AMARILLO TEXAS 79189											
Reason(s) for Filing (Check proper box) Change in Transporter of: Recompletion Oil Dry Gas Effective Date: 7/01/90											
f change of operator give name and address of previous operator											
I. DESCRIPTION OF WELL A	AND LEA	ASE									
MC LEOD FEDERAL Well No. Pool Name, Including 2 Basin I								Kind of Lease State, Federal or Fee SF 046563			
Location Unit Letter L	. 17	00	Feet Fr	mm The Si	outh Line	105	0	et From The	west	Line	
Section 34 Township 28N Range 10W						, NMPM, San Juan				County	
III. DESIGNATION OF TRANS		R OF O			RAL GAS						
Name of Authorized Transporter of Oil		or Conder		X	Address (Giw	e address to w				1	
GIANT REFINING CO. Name of Authorized Transporter of Casinghead Gas or Dry Gas X EL PASO NATURAL GAS CO.						P.O. BOX 12999, SCOTTSDALE, AZ 85267 Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1492, EL PASO, TEXAS 79998					
If well produces oil or liquids,	Unit Sec. Twp. Rge.			Is gas actually connected? W			en ?				
give location of tanks. If this production is commingled with that f	Dm any of	34	28		Ye			2/29	7/60		
IV. COMPLETION DATA	.o.n . , o.	ici icaz oi	pout, gr	ve comming.	mg older mann						
Designate Type of Completion -	· (X)	Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compil. Ready to Prod.				Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
Perforations					L	Depth Casing Shoe					
		TUBING.	CASI	NG AND	CEMENTI	NG RECOR	ND	·····			
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
					<u> </u>	<u>. </u>					
V. TEST DATA AND REQUES					l			 			
OIL WELL (Test must be after re Date First New Oil Run To Tank	Date of Te		of load	oil and must					for full 24 hou	<u>rs.)</u>	
Date of less					Producing Method (Flow, pump, gas lift, etc.)						
Length of Test	Tubing Pressure				Casing Presente			Choke Size			
Actual Prod. During Test	Oil - Bbls.					Water - Bbls. JUL2 2 1990			Gas-MCF		
GAS WELL						DIL CO	N. DIY	1,1			
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MNO			Gravity of Condensate			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					OIL CONSERVATION DIVISION Date Approved JUL 2 5 1990						
Signature Signature					By_	By Bul Chang					
Carolyn L. McKee, Regulatory Analyst Printed Name Title 7/1/90 (806) 378-1000					Title)	SUPE	RVISOR	DISTRICT	# 3	
Date Telephone No.											

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.